PART B -FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE **Commissioner for Patents** P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

| | ted below or directed oth | | | | | | ting a separate "FEE ADDRESS" |
|---|---|---|---|---|--|---|--|
| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 28120 ROPES & GRAY LLP Prudential Tower 800 Boylston Street Boston, Massachusetts 02199 | | | | | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. | | |
| | | | | | | | (Depositor's name) |
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| | | | | | <u> </u> | | (Date) |
| APPLICATION NO. | FILING DATE | | | ED INVENTOR | | ATTORNEY DOCKET NO | |
| 10/587,429 | 04/23/2007 | 3/2007 Ralph Koschinsk | | | | ACIZ-328-301 | 8163 |
| TITLE OF INVENTION | N: IONTOPHORET | TIC ELECTRO | DE | | | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE | FEE | PUBLICA | ATION FEE | TOTAL FEE(S) DUE | DATE DUE |
| Non-Provisional | rovisional no \$1 | | 0.00 | \$3 | 00.00 | \$1,810.00 | 08/13/2011 |
| EXAM | ART UNIT | | CLASS-S | UBCLASS | | | |
| M. A. M | 376 | | | ent front page, | | | |
| Correspondence "Fee Address" in form PTO/SB/4 Use of a Custor 3. ASSIGNEE NAME A PLEASE NOTE: Unlo | respondence address (o Address form PTO/SB/1 ndication (or "Fee Addres 7; Rev 03-02 or more rec ner Number is required AND RESIDENCE DAT ess an assignee is identifit forth in 37 CFR 3.11. Co | 22) attached. ss" Indication ent) attached A TO BE PRIN ed below, no as | attorneys or (2) the nam a registered up to 2 reginame is liste VTED ON THE ssignee data versions NO | r agents OR, a se of a single I attorney or istered patent ed, no name v HE PATENT will appear of T a substitute | firm (having as agent) and the attorneys or agwill be printed. (print or type) in the patent. If a for filing an acce: (CITY and | a member 2 ents. If no 3 | w, the document has been filed |
| Please check the appropriate assignee category or categories (will not be printed on the patent): Individual X Corporation or other private group entity Government | | | | | | | |
| | | | | Payment of I | | | - · · 🗀 |
| 4a. The following fee(s) are enclosed: X Issue Fee | | | A check in the amount of the fee(s) is enclosed. | | | | |
| X Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. | | | | | | | |
| Advance Order | X The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 18-1945 | | | | | | |
| 5. Change in Entity St | atus (from status indicate | ed above) | _ | _ | | | |
| a. Applicant clai | ims SMALL ENTITY sta | itus. See 37 CF | R 1.27. | k b. Applic | ant is no longe | r claiming SMALL ENTITY | status. See 37 CFR 1.27(g)(2). |
| NOTE: The Issue Fee and | | d) will not be ac | ccepted from | | | eviously paid issue fee to the ap nt; a registered attorney or age | plication identified above. nt; or the assignee or other party in |
| Authorized Signature /Joshua | | | S. Jackson/ | | | Date | August 5, 2011 |
| Typed or printed na | me | Joshua S. Jackson | | | | Registration No. | 64.895 |